



Modified PTO/SB/17 (09-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL FOR FY 2002

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Complete if Known

| | |
|----------------------|-----------------------|
| Application Number | 10/066,023 |
| Filing Date | 01/30/02 |
| First Named Inventor | Allen K. Lam |
| Group Art Unit | 2826 |
| Examiner Name | Alexander O. Williams |

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$ 200.00)

Attorney Docket No AAT009-2D US

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge any additional fees and credit any overpayments to:

Deposit Account Number 55-2263

Deposit Account Name Silicon Valley Patent Group LLP

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit Card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

| Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid |
|----------------|-----------------|----------------|-----------------|------------------------|----------|
| 101 | 740 | 201 | 370 | Utility filing fee | |
| 106 | 330 | 206 | 165 | Design filing fee | |
| 107 | 510 | 207 | 255 | Plant filing fee | |
| 108 | 740 | 208 | 370 | Reissue filing fee | |
| 114 | 160 | 214 | 80 | Provisional filing fee | |

SUBTOTAL (1) (\$0.00)

2. EXTRA CLAIM FEES

| Total Claims | | - 29** = | | 0 | x | 9 | = | \$0 | Extra Claims | Fee from below | Fee Paid |
|--------------------|-----------------|----------------|-----------------|-----------------------------------------------------------|---|-----|---|-----|--------------|----------------|----------|
| Independent Claims | | 6 - 6** = | | 0 | x | 42 | = | \$0 | 144 | 620 | 244 |
| Multiple Dependent | | | | 0 | | 140 | = | \$0 | 122 | 130 | 122 |
| Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description | | | | | 123 | 50 | 123 |
| 103 | 18 | 203 | 9 | Claims in excess of 20 | | | | | 126 | 180 | 126 |
| 102 | 84 | 202 | 42 | Independent claims in excess of 3 | | | | | 146 | 740 | 246 |
| 104 | 280 | 204 | 140 | Multiple dependent claims, If not paid | | | | | 149 | 740 | 249 |
| 109 | 84 | 209 | 42 | **Reissue independent claims over original patent | | | | | 179 | 740 | 279 |
| 110 | 18 | 210 | 9 | **Reissue claims in excess of 20 and over original patent | | | | | 169 | 900 | 169 |

SUBTOTAL (2) (\$0.00)

** or number previously paid, if greater; For reissues, see above.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid |
|----------------|-----------------|----------------|-----------------|------------------------------------------------------------------------------|----------|
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for <i>ex parte</i> reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 116 | 400 | 216 | 200 | Extension for reply within second month | 200 |
| 117 | 920 | 217 | 460 | Extension for reply within third month | |
| 118 | 1,440 | 218 | 720 | Extension for reply within fourth month | |
| 128 | 1,960 | 228 | 980 | Extension for reply within fifth month | |
| 119 | 320 | 219 | 160 | Notice of Appeal | |
| 120 | 320 | 220 | 160 | Filing a brief in support of an appeal | |
| 121 | 280 | 221 | 140 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to Institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,280 | 241 | 640 | Petition to revive - unintentional | |
| 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) | |
| 143 | 460 | 243 | 230 | Design issue fee | |
| 144 | 620 | 244 | 310 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions of the Commissioner | |
| 123 | 50 | 123 | 50 | Petitions related to provisional applications | |
| 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per properties (times number of properties) | |
| 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$200.00)

SUBMITTED BY

Complete (if applicable)

| | | | | | |
|-------------------|------------------|-----------------------------------|--------|-----------|-----------------------|
| Name (Print/Type) | David E. Steuber | Registration No. (Attorney/Agent) | 25,557 | Telephone | (408) 982-8200 ext. 1 |
| Signature | | | | Date | December 19, 2002 |

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PTO/SB/21 (08-00)
Approved for use through 10/31/02. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number Of Pages In This Submission

| | |
|----------------------|-----------------------|
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| First Named Inventor | Allen K. Lam |
| Group Art Unit | 2826 |
| Examiner Name | Alexander O. Williams |
| Attorney Docket No. | AAT009-2D US |

| ENCLOSURES (check all that apply) | | |
|---------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declarations | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input checked="" type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | <input type="checkbox"/> Remarks | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

| | |
|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| Firm or Individual Name | David E. Steuber (Reg. No. 25,557) Silicon Valley Patent Group LLP 2350 Mission College Boulevard, Suite 360 Santa Clara, California 95054 |
| Signature | |
| Date | 12/19/02 |

Express Mail Label No.: _____

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